

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SE		6-17-01
O.I.P.E. CLASSIFIER		2	
FORMALITY REVIEW	TM	ICB 84	8/7/01
RESPONSE FORMALITY REVIEW	TZ	947	10/23/01

INDEX OF CLAIMS

..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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